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ABSTRACT

This guide was designed to aid prevention specialists, educators, parents, and others in addressing tobacco problems among youth. Listed here are numerous publications--each one summarized--on tobacco use. The guide is divided into two sections: (1) Prevention Material for tobacco; and (2) Studies, Articles, and Reports on Tobacco. Section one includes publications on secondhand smoke, spit tobacco, non-smokers' rights, tobacco as a drug, smoking and health, and other information. Each listing includes the following information: title, organization responsible for publication, publication date, format, topic, target audience, setting, readability, inventory number, and availability, including addresses and phone numbers. Many of the materials are for children. Section two, which consists of government publications and journal articles, features more extensive summaries than those that appear in the previous section. Some of the titles here address prevention, addiction, women, tobacco advertising, peer group influence, maternal smoking, Black Americans, prevention programs, health consequences, youth, passive smoking, predictors of use, gender differences, intervention, and government policy. Names, addresses, and phone numbers for groups, organizations, and programs on tobacco appear at the end of the guide. (RJM)

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Alcohol, Tobacco, and Other Drugs Resource Guide

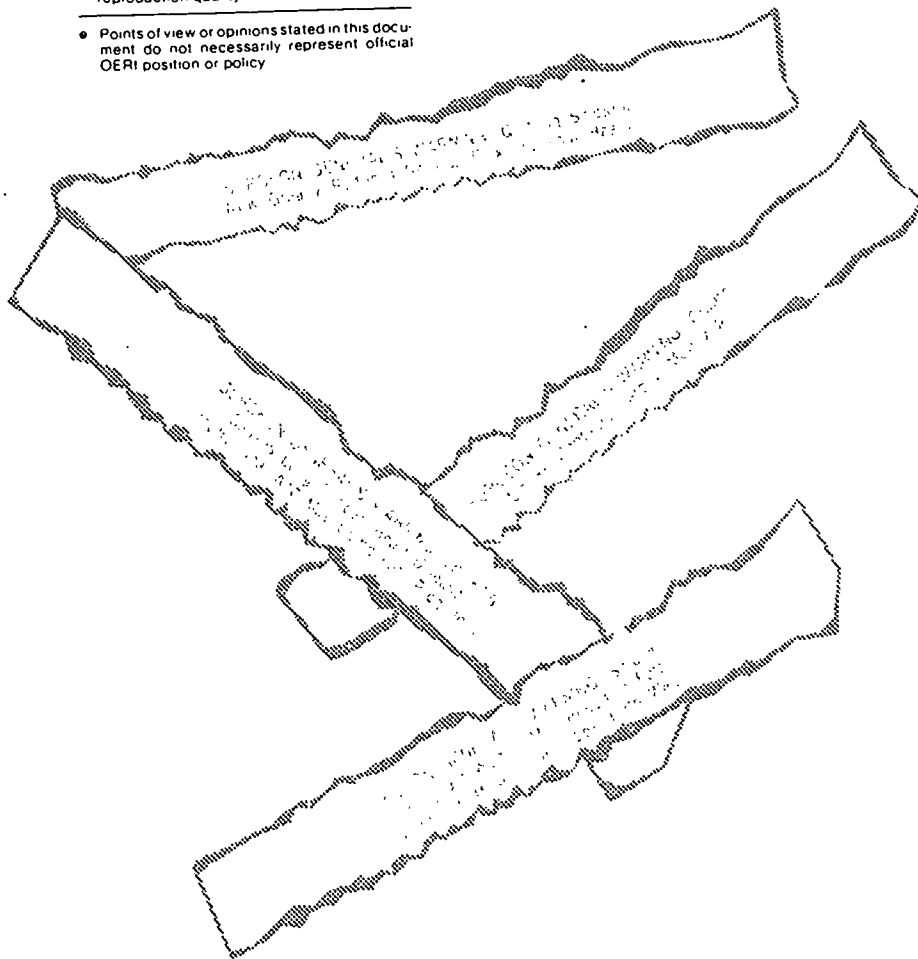
Drug-Free by the Year 2000

Tobacco

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December 1993

Prevention Material . . . 1

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From the Acting Director of CSAP...

According to the Centers for Disease Control and Prevention, roughly 419,000 people die in the United States from tobacco use every year. Teenagers make up the largest percentage of new cigarette smokers and studies show that tobacco is one of the most common "gateway drugs" there is. Obviously, the problem of tobacco use among our country's youth must be addressed.

CSAP recognizes the seriousness of tobacco problems and is working diligently to bring hope for a healthier tomorrow. Designed to aid prevention specialists, educators, parents, and others, this resource guide includes a listing of exciting and colorful prevention materials, useful research abstracts, and relevant resources for your use and attention. Prevention works. We can save lives.

Vivian L. Smith, M.S.W.



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
Substance Abuse and Mental Health Services Administration

The listing of materials or programs in this resource guide does not constitute or imply endorsement by the Center for Substance Abuse Prevention, the Public Health Service, or the Department of Health and Human Services. The materials have been reviewed for accuracy, appropriateness, and conformance with public health principles.

This Alcohol, Tobacco, and Other Drugs Resource Guide was compiled from a variety of publications and data bases and represents the most current information to date. It is not an all-inclusive listing of materials on this topic. This guide will be updated regularly, and your comments or suggestions are welcome. To suggest information or materials that might be included in updated editions, please write to the **National Clearinghouse for Alcohol and Drug Information (NCADI)**, P.O. Box 2345, Rockville, MD 20847-2345.

Produced by the National Clearinghouse for Alcohol and Drug Information, Karen Zuckerman, editor.

For further information on alcohol, tobacco, and other drugs, call 1-800-729-6686, 301-468-2600, or TDD 1-800-487-4889.



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Prevention Material for Tobacco

It's Time To Stop Being A Passive Victim

Organization: Centers for Disease Control and Prevention

Year: 1993

Format: Information Kit

Length: 20 Pages

Topic: Secondhand Smoke

Target Audience: Parents, Employees, General Public

Setting: Home, Health Care

Readability: Fairly Difficult

Inventory Number: PHD651

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. 2345, Rockville, MD 20847-2345, 301-468-2600, 1-800-729-6686

This information kit describes secondhand smoke as a poison and states that passive smokers, especially children, are at risk for a host of physical problems including lung cancer, pneumonia, and bronchitis. Parents are pressed to keep their homes smoke-free, employees are encouraged to petition for a non-smoking policy in the workplace, and all are urged to appeal for a smoke-free atmosphere at their favorite restaurant. Fact sheets, containing action steps and resources, are included.

Secondhand Smoke: What You Can Do About Secondhand Smoke as Parents, Decisionmakers, and Building Occupants

Organization: Environmental Protection Agency (EPA)

Year: 1993

Format: Brochure

Length: 4 Pages

Topic: Secondhand Smoke

Target Audience: Parents, Policymakers/Administrators, Employers

Setting: Home, Government, Workplace

Readability: Difficult

Availability: EPA, Indoor Air Quality Information Clearinghouse, P.O. Box 37133, Washington, DC 20013-7133, 301-585-9020, 1-800-438-4318

This brochure explains the risks of secondhand smoke and states that passive smoking is estimated to cause roughly 3,000 lung cancer deaths in nonsmokers each year. Suggestions are offered on how parents, employers, restaurant owners, and building occupants can protect themselves and others from the dangers of passive smoking. A special message for smokers is also included, asking them, among other things, to refrain from smoking around children and to encourage their employers to offer a smoking cessation program.

The Challenge: Focus on Spit Tobacco

Organization: U.S. Department of Education
Year: 1993

Format: Newsletter

Length: 24 Pages

Topic: Spit Tobacco

Target Audience: Alcohol/Drug Prevention
Professionals and Educators

Setting: School

Readability: Difficult

Inventory Number: PHD650

Availability: National Clearinghouse for
Alcohol and Drug Information, P.O. Box
2345, Rockville, MD 20847-2345,
301-468-2600, 1-800-729-6686

The *Challenge* is a quarterly newsletter, produced by the Department of Education, containing lesson plans, information on state-of-the-art programs, and topical articles on alcohol, tobacco, and other drug use and prevention. This issue focuses on spit tobacco and includes a look at the history of spit tobacco, curricula for students in grades K-12, facts and figures about spit tobacco and youth, prevention and education programs, and resources.

Beat the Smokeless Habit

Organization: National Cancer Institute

Year: 1992

Format: Booklet

Length: 20 Pages

Topic: Smokeless Tobacco

Target Audience: Student Athletes (Baseball
Players), Recreation/Sports Personnel

Setting: Recreation/Sports

Readability: Average

Availability: Cancer Information Service,
1-800-4CANCER

B*eat the Smokeless Habit* contains information on smokeless tobacco and offers student baseball players a nine-inning game plan on how to break the habit. Professional baseball player cards are scattered throughout the booklet as are quotes from players such as Nolan Ryan, John Franco, and Norm Charlton. The booklet discusses the history of smokeless tobacco, contains information about the drug's health risks, including graphic photographs of patients with smokeless tobacco-induced mouth cancer, and offers suggestions and encouragement on how to quit.

I Mind Very Much if You Smoke

Organization: National Cancer Institute

Year: 1993

Format: Booklet

Length: 12 Pages

Topic: Secondhand Smoke

Target Audience: Parents, Employees,
General Public

Setting: Home, Worksite

Readability: Fairly Difficult

Availability: Cancer Information Service,
1-800-4CANCER

This brochure states that secondhand smoke can cause serious adverse health complications, including lung cancer, heart disease, pneumonia, and asthma. It advises readers to say "no" to secondhand smoke at home, at the worksite, and in public places and suggests tactful ways to do so. Additional action steps for nonsmokers to take are included as is a list of organizations for further information.

Drugs Mean Nicotine Too!

Gillespie, J.

Organization: Hazelden

Year: 1989

Format: Brochure

Length: 8 Pages

Topic: Tobacco, Alcohol, and Other Drugs,
and Prevention

Target Audience: Community Service
Groups and Youth ages 5-15

Setting: Community Organization and
School

Readability: Easy

Availability: Hazelden, Pleasant Valley
Road, P.O. Box 176, Center City, MN
55012-0176; 800-328-9000

This pamphlet defines tobacco as "the hidden drug," and states that it is one of the most addictive drugs. Effects of nicotine on the body, why people begin to smoke, and why it is so difficult to stop are some of the topics addressed. Teenagers are urged to talk to a parent, friend, or teacher about their problems and not to "plug up your mouth with a cigarette and medicate your scared or angry feelings with nicotine."

About Tobacco

Peterson, P.G.

Organization: Network Publications

Year: 1990

Format: Brochure

Length: 5 Pages

Topic: Tobacco Prevention, Intervention
and Treatment

Target Audience: Jr. and Sr. High Youth

Setting: Home and School

Readability: Average

Availability: Network Publications, P.O. Box
1830, Santa Cruz, CA 95061-1830;
1-800-321-4407

This brochure explains why tobacco is so dangerous and what the chemicals inside the tobacco plant can do to the body. Cancer, heart disease, and strokes are discussed as potential conditions that tobacco may cause, and special risk populations such as pregnant women are highlighted.

Smokeless Tobacco! Yolanda and Mark Talk to Teens

Stang, L.

Organization: Network Publications

Year: 1990

Format: Brochure

Length: 7 Pages

Topic: Tobacco Prevention, Intervention
and Treatment

Target Audience: Jr. and Sr. High Youth

Setting: Home and School

Readability: Easy

Availability: ETR Associates, Network
Publications, P.O. Box 1830, Santa Cruz,
CA 95061-1830; 1-800-321-4407

Two teenagers discuss the negative effects of smokeless tobacco on health and appearance. Facts about the addictiveness of snuff are included, and suggestions on how to quit are listed.

It's Just a Matter of Time

Organization: Captain K.I.D. Productions

Year: 1990

Format: Poster

Length: 1 Page

Topic: Tobacco Prevention, Intervention
and Treatment

Target Audience: Elementary Youth and
Preschool

Setting: Home and School

Readability: Low Literacy

Availability: Captain K.I.D. Productions, P.O.
Box 25529, Anaheim, CA 92825-5529;
714-758-8441

This poster shows an illustration of four cigarettes with a running time bomb wrapped around them. The message, in bright red letters, reads, "It's Just a Matter of Time!"

Everything You Need to Know About Smoking

Keyishian, E.

Organization: The Rosen Publishing Group, Incorporated

Year: 1989

Format: Book

Length: 64 Pages

Topic: Tobacco Prevention, Intervention and Treatment

Target Audience: Elementary, Jr. High, and Sr. High Youth

Setting: Home and School

Readability: Easy

Availability: The Rosen Publishing Group, Incorporated, 29 East 21st Street, New York, NY 10010; 212-777-3017

This book provides a host of information about cigarette smoking. Chapters address such topics as health risks, cigarette advertisements, addiction, and quitting. A glossary is included to explain new words, and a suggested reading list is offered.

The Performance Edge: A Guide for Coaches and Teachers

Organization: U.S. Department of Health and Human Services

Year: 1989

Format: Brochure

Length: 4 Pages

Context: Part of a Packet/Program

Topic: Tobacco, Alcohol, and Other Drugs Prevention

Target Audience: Educators and Coaches

Setting: School

Readability: Easy

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847; 800-729-6686

This trifold offers assistance for coaches and teachers on how to help their students stay away from tobacco, alcohol, and other drugs. Useful facts about tobacco and alcohol are mentioned as are suggested topics for classroom discussion. An extensive resource list for additional information is also included.

Score: The Performance Magazine

Organization: U.S. Department of Health and Human Services

Year: 1989

Format: Magazine

Length: 7 Pages

Context: Part of a Packet/Program

Topic: Tobacco, Alcohol, and Other Drugs Prevention

Target Audience: Jr. and Sr. High Youth

Setting: School

Readability: Easy

Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847; 800-729-6686

This magazine, which makes up part of the Performance Edge kit, explains to teenagers how drinking and smoking hurt athletic performance and take away the "edge" regarding fitness and sex appeal. Colorfully illustrated with charts, brief articles, and quizzes, this

magazine conveys a definite no use message, and lists resources for further information.

The Performance Edge

Organization: U.S. Department of Health and Human Services
Format: Poster
Length: 1 Page
Topic: Tobacco, Alcohol, and Other Drugs Prevention
Target Audience: Young Adults, Sr. High Youth, and Athletes
Setting: Recreation/Sports and School
Readability: Average
Availability: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847; 800-729-6686

This poster pictures an Olympic athlete performing a dive. The slogan reads "Tobacco and Alcohol Don't Mix with the Performance Edge."

Not In Here, Dad!

Dutton, C.

Organization: Barron's Educational Series
Year: 1989
Format: Book
Length: 24 Pages
Topic: Tobacco
Target Audience: Elementary Youth
Setting: Home and School
Readability: Easy
Organization: Barron's Educational Series, Incorporated, 250 Wireless Boulevard, Hauppauge, NY 11788; 516-434-3311

This picture book tells the story of the Smith family and how Mr. Smith's smoking habit disrupted their lives. Targeted toward young children, the book tells how the cigarettes hurt Mr. Smith's health and caused the whole house to

smell of smoke. After much persuasion Mr. Smith breaks his habit and the whole family rejoices.

Smoking & Health

Dye, C.

Organization: Do It Now Foundation
Year: 1991
Format: Brochure
Length: 8 Pages
Context: Stands Alone and Part of a Packet/Program
Topic: Tobacco Prevention
Target Audience: General Public and Women
Setting: Community Organization and Home
Readability: Fairly Difficult
Availability: D.I.N. Publications, P.O. Box 27568, Tempe, AZ 85285; 602-491-0393

This brochure points out the dangerous effects of cigarette smoking. Public policy information is given and statistics and charts are included that document recent trends and correlations. Suggestions are given on ways to "un-stress" while trying to quit.

About Smoking

Organization: Alcoholism and Drug Addiction Research Foundation
Year: 1989
Format: Booklet
Length: 4 Pages
Topic: Tobacco
Target Audience: Elementary, Jr. High, and Sr. High Youth
Setting: Home and School
Language: Bilingual--French and English
Readability: Easy
Availability: Alcoholism and Drug Addiction Research Foundation, 33 Russell Street, Toronto, Canada M5S 2S1; 800-661-1111

This booklet, available in both English and French versions, discusses the chemical make-up of tobacco and explains how cigarettes are made. The physical effects of nicotine on the body are stated, with references to prenatal exposure and second-hand smoke. Information is presented through cartoons, charts, and brief paragraphs.

Tobacco: Habit or Addiction

Organization: Life Skills Education, Inc.

Year: 1989

Format: Booklet

Length: 14 Pages

Topic: Tobacco

Mode of Delivery: Self-Instructional and Instructor-led

Target Audience: General Public, Parents, and Sr. High Youth

Setting: Home and School

Readability: Average

Availability: Life Skills Education, Inc., 226 Libbey Parkway, Weymouth, MA 02189; 617-337-7828

This pamphlet provides extensive information on tobacco. Topics include why people begin to smoke, facts and figures regarding smoking related diseases, specific concerns for women, risks of second-hand smoke, and issues surrounding quitting. A listing of resources for further information is also included.

Tobacco

Organization: Performance Resources Press, Inc.

Year: 1991

Format: Brochure

Length: 1 Page

Context: Stands Alone and Part of a Packet/Program

Topic: Tobacco, Prevention, Intervention, and Treatment

Target Audience: Educators, Employers, and Sr. High Youth

Setting: Home and School

Language: English and Spanish

Readability: Fairly Difficult

Availability: Performance Resources Press, Inc., 1863 Technology Drive, Suite 200, Troy, MI 48063-4244; 313-588-7733

This pamphlet includes information on the health effects of cigarette smoking. Smoking during pregnancy, effects on the nonsmoker, smokeless tobacco, and getting ready to quit are some of the topics addressed.

Smokeless Tobacco: Is It Worth the Risk?

Bailey, B.J.

Organization: American Academy of Otolaryngology, Head and Neck Surgery

Year: 1989

Sponsor/Endorser: National Cancer Institute

Format: VHS Video

Length: 13 Minutes

Topic: Tobacco Prevention

Target Audience: College Students, Sr. High Youth, and Young Adults

Setting: School

Literacy level: Average

Availability: American Academy of Otolaryngology, Head and Neck Surgery, 1 Prince Street, Alexandria, VA 22314; 703-519-1528

This video explores the dangers of smokeless tobacco use. Professional baseball players convey the risks of chewing tobacco and dip. Graphic photographs show the physical effects of mouth cancer, and doctors offer advice on how to quit the smokeless tobacco habit.

Tobacco: Mind-Altering Drug Series

Organization: Wisconsin Clearinghouse

Year: 1991

Format: Booklet

Length: 14 Pages

Context: Stands Alone and Part of a Packet/Program

Topic: Tobacco Prevention

Target Audience: General Public, High-Risk Youth, and Young Adults

Setting: Community Organization and Health Care

Readability: Fairly Difficult

Availability: Wisconsin Clearinghouse, P.O. Box 1468, Madison, WI 53701-1468; 1-800-322-1468

This booklet provides basic information about the short-term and long-term effects of tobacco use. The hazards associated with its use are described, and a breakdown of who uses tobacco is conveyed through charts and graphs. Reasons why people use tobacco and the legal aspects of cigarette smoking and advertising are included.

Take Pride in What's Inside with... The Insiders: The Tobacco Temptation

Organization: Syndistar, Inc.

Year: 1991

Format: Comic Book

Length: 17 Pages

Topic: Tobacco Prevention

Target Audience: Educators--Grades 1-6 and Elementary Youth

Setting: Home and School

Readability: Low Literacy

Availability: Syndistar, Inc., 125 Mallard Street, St. Rose, LA 70087-9471; 1-800-841-9532

In this comic book Alpha the robot teaches kids to "Take pride in what you put inside." He shows kids why smoking cigarettes or using other tobacco products is an unhealthy decision. The influence that parents, advertising, and peers have on kids is discussed, and facts about the physical effects of cigarette smoking are mentioned.

Bad Mouthin: What Smokeless Tobacco Can Do to You

Organization: Wisconsin Clearinghouse

Year: 1990

Format: Comic Book

Length: 6 Pages

Topic: Smokeless Tobacco Prevention

Target Audience: Educators Grades 1-9, Elementary Youth, and General Public

Setting: Community Organization and School

Readability: Easy

Availability: Wisconsin Clearinghouse, P.O. Box 1468, Madison, WI 53701; 1-800-322-1468

This comic book uses cartoon sketches to convey the dangers of chewing smokeless tobacco. Young teens discuss the physical effects snuff has on the mouth and gums, and dispel myths that many advertisements promote.

Kids Say Don't Smoke

Tobias, A.

Organization: Smokefree Educational Services, Inc.

Year: 1991

Format: Book

Length: 50 Pages

Topic: Prevention

Target Audience: General Public

Setting: Community Organization

Readability: Average

Availability: Smokefree Educational
Services, Inc., 375 South End Avenue,
Suite 32F, New York, NY 10280-1085;
212-912-0960

This book provides a host of reasons why kids should not start smoking. Each page also features a copy of a winning student's full-color poster from the first annual Smoke-Free Ad Contest. Facts, figures, and famous quotations are dispersed throughout the book, and an "Organizations of Interest" list is included.

Thank You for Not Smoking Near Me: Second Hand Smoke Is Bad for My Health

Organization: Dogs Against Drugs

Year: 1991

Format: T-Shirt (children's sizes only)

Topic: Tobacco Prevention

Target Audience: Elementary Youth

Setting: Home

Readability: Low Literacy

Availability: Dogs Against Drugs, P.O. Box
12164, Santa Rosa, CA 95406;
707-575-8813

This four-color t-shirt shows a lit cigarette with an X through it, and the words, "Thank you for not smoking near me: Second hand smoke is bad for my health." Advertised as a walking billboard, this t-shirt, which is designed for youth, asks adults not to smoke around children.

Studies, Articles, and Reports on Tobacco

Government Publications and Journal Articles

Preventing Tobacco Use Among Young People: A Report of the Surgeon General

Report, Centers for Disease Control and Prevention (in press), 1994

(Available from CDC: 1-800-CDC-1311)

One out of three adolescents in the United States is using tobacco by age 18, adolescent users become adult users, and few people begin using tobacco after age 18. Preventing young people from starting to use tobacco is the key to reducing the death and disease caused by tobacco use. This report documents that intervention programs targeting the broad social environment of adolescents are both effective and warranted. The report examines the health effects of early tobacco use, the reasons why young people begin using tobacco, the extent to which they use it, and efforts to prevent tobacco use by this population. Six major conclusions are highlighted: 1) Nearly all first tobacco use occurs before high school graduation; 2) Most adolescent smokers are addicted to nicotine and report that they want to quit; 3) Tobacco is often the first drug used by those young people who use alcohol, marijuana, and other drugs; 4) Adolescents with lower

levels of school achievement, with fewer skills to resist pervasive influences, with friends who use tobacco, and with poorer self-images are more likely than their peers to use tobacco; 5) Cigarette advertising appears to increase young people's risk of smoking; and 6) Community-wide efforts, which include tobacco tax increases, enforcement of minors' access laws, youth-oriented mass media campaigns, and school-based programs, are successful in reducing adolescent use of tobacco.

Tobacco May Provide Gateway to Drug, Alcohol Abuse

Keegen, A.

NIDA Notes Summer/Fall 1991

Scientists are accumulating evidence that tobacco and its key ingredient, nicotine, may provide a gateway to illicit drug use and alcohol abuse. While the use of tobacco products is not a specific cause of drug and alcohol abuse, it clearly is one of the most powerful, preventable risk factors preceding drug and alcohol abuse. Three characteristics of tobacco that may be involved in the subsequent abuse of drugs or alcohol are outlined. First, nicotine is a potent, addicting drug. Second, cigarette smoking is a complex learned behavior. Third, nicotine is used to regulate mood and behavior; it provides relief from

stress and boredom. Tobacco then becomes a stepping stone to other drug use. Other factors making a person vulnerable to drug use include stress, socioeconomic status, exposure frequency, and possibly even genetic predisposition; however, tobacco use is the most preventable risk factor to such behavior. 3 Ref.

Predictors of Smoking Prevalence among New York Latino Youth

Dusenbury, L.; Kerner, J. F.; Baker, E.; Botvin, G.; James-Ortiz, S.; and Zauber, A.

American Journal of Public Health
82(1):55-58, 1992

(Available from Linda Dusenbury,
Department of Public Health, Cornell
University Medical College, 411 East 69th
Street, New York, NY 10021.)

The authors examined prevalence rates and risk factors for smoking among Latino adolescents, using a multiethnic sample of sixth- and seventh-grade students ($n = 3,129$) in 47 New York City public and parochial schools. The students completed questionnaires; self-reported smoking data were collected by means of the "bogus pipeline" technique. The largest group of Latino students (43 percent) was Puerto Rican; 20 percent were of Dominican background, 7 percent were Colombian, and 7 percent were Ecuadorian. "Current smoking" was defined as smoking at least once per month. A series of logistic regression analyses indicated that peer influence was the strongest predictor of smoking. Family influence was important as well. The results are discussed in terms of their implications for prevention. 13 Ref.

Biobehavioral Research on Nicotine Use in Women

Pomerleau, C. S.; Pomerleau, O. F.; and Garcia, A. W.

British Journal of Addiction 86(5):527-531,
1991

(Available from Cynthia S. Pomerleau,
University of Michigan, Department of
Psychiatry, Behavioral Medicine Program,
Riverview Medical Building, 900 Wall
Street, Ann Arbor, MI 48105.)

More American women are taking up smoking than men and fewer are quitting; if current trends continue, rates for women will surpass those for men by the mid-1990s. But ironically, much of what is known about the biobehavioral aspects of smoking is based on research using male subjects. The present paper reviews evidence suggesting that: (1) women may differ from men with regard to nicotine intake and/or effects; (2) nicotine intake and effects may be influenced by menstrual cycle phase; (3) oral contraceptive use and estrogen replacement therapy may affect intake and effects of nicotine; (4) the effects of chronic nicotine use on female reproductive endocrinology may have implications for the reinforcement of smoking; and (5) pharmacological agents used to treat smoking may have different effects in women than in men. Guidelines and suggestions are presented by future biobehavioral research in women, including standardization of assessment procedures, attention to the use of appropriate controls, and use of pharmacological probes. 40 Ref.

Tobacco Advertising in Gender-Oriented Popular Magazines

Krupka, L. R.; Vener, A. M.; and Richmond, G.

Journal of Drug Education 20(1):15-29, 1990

(Available from Lawrence R. Krupka, Michigan State University, Department of Natural Sciences, East Lansing, MI 48824.)

The number and content of tobacco advertisements were examined in 74 gender-oriented popular magazines published during the summer of 1988. More ads were present in women's than men's magazines, and the messages contained in these ads were differentially stressed as a function of the magazine's primary readership. The type of Surgeon General's warning appearing in an ad often was not directed toward the typical concerns of the readership of the magazine in which the ad appeared. This survey, and a follow-up 3 months later, indicated that the Surgeon General's report on nicotine addiction, published in the Spring of 1988, had no apparent effect on the number of ads placed. Advertising revenues received by publishers from conglomerates that control the manufacture of foods as well as tobacco products may be partially responsible for this finding. It was concluded that effective drug education programs should encourage skepticism when tobacco advertisements are examined. 28 Ref.

Peer Group Influence as a Factor in Smoking Behavior of Adolescents

vanRoosmalen, E. H.

JAMA: Journal of the American Medical Association 264(12):1591, 1990

(Available from Susan A. McDaniel, Department of Sociology, University of Alberta, Edmonton, Alberta T6G 2H4, Canada.)

Adolescents, as the fastest growing group of smokers, have been a focus and concern of health educators and researchers. Adolescent smoking is of particular interest because initiation and early habits are known to have important implications for lifetime smoking or cessation. Despite the well-known centrality of the peer group in adolescent behavior, smoking cessation programs have been largely directed toward individuals rather than groups, with emphasis on encouraging the individual to say "no." In this article, smoking behavior and peer group patterns among a sample of 1,689 eighth-grade students from southern Ontario were assessed. It was found that peer groups are crucially important in the initiation of smoking among young adolescents, particularly girls. The patterns of indirect peer influence on girls is such that girls are less likely to stop smoking once they have begun than are boys.

Tobacco Foes Attack Ads That Target Women, Minorities, Teens, and the Poor

JAMA: Journal of the American Medical Association 264(12):1505, 1990

Advocates for women, minorities, youth, and economically disadvantaged people are among the anti-smoking activists adopting what they see as the tobacco industry's own tactics: moving away from wide-angle warnings about the long-term health hazards and focusing instead on different brands, the smoker's self-image, and the short-term social consequences, in messages tai-

lored to these specific groups. Four hundred thousand of the 2.5 million smokers the tobacco industry loses every year are lost because of tobacco-related deaths. The new smokers that act as replacements for these are children, with an average starting use age of 12.5 years. A variety of activities that organizations are pursuing to end the tobacco advertisements targeted to high-risk groups are outlined.

Cigarette Advertising and Adolescent Experimentation with Smoking

Klitzner, M.; Gruenewald, P. J.; and Bamberger, E.

British Journal of Addiction 86(3):287-298, 1991

(Available from Paul J. Gruenewald, Prevention Research Center, Pacific Institute for Research and Evaluation, 2532 Durant Avenue, Berkeley, CA 94704.)

The extent to which cigarette advertising contributes to increases in smoking has been debated by public health professionals and the tobacco industry. One aspect of this debate has been the degree to which advertising influences smoking among adolescents. Previous research suggests that there are significant relationships between measures of advertising and smoking. However, potential simultaneous relationships between these measures have not been addressed. Observed correlations may arise from the effects of advertising on smoking or from smokers' selective exposure to advertisements. This study examined relationships between cigarette advertising and smoking experimentation. Using environmental and psychological measures of advertising expo-

sure, it was demonstrated that adolescents who experimented with cigarettes were better able to recognize advertised products than those who had not, a selective exposure effect. Conversely, subjects who were better at recognizing advertised brands were more likely to have experimented with cigarettes, an effect due to their exposure to cigarette advertising. 34 Ref.

Tobacco Use by American Indian Youth

Moncher, M. S.; Schinke, S. P.; Holden, G. W.; and Aragon, S.

JAMA: Journal of the American Medical Association 262(11):1469, 1989

A study of 1,150 female and male American Indian youth revealed high rates of tobacco use. Responding to 126 items on a confidential questionnaire, children reported their lifetime prevalence of smoked and smokeless tobacco and their use during the prior 7 days and 24 hours. Analysis of self-reported tobacco use focused on rates of lifetime prevalence, recent incidence, and peer use. The present findings, together with other data, suggest the need for more research on the development of culturally sensitive assessment and prevention interventions targeting tobacco use among American Indian youths. 4 Ref.

Maternal Smoking During Pregnancy Affects Children's Vigilance Performance

Kristjansson, E. A.; Fried, P. A.; and Watkinson, B.

Drug and Alcohol Dependence 24(1):11-19, 1989

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(Available from Elizabeth A. Kristjansson, Carleton University, Department of Psychology, Ottawa, Ontario K1S 5B6, Canada.)

Aspects of attention behavior in 4 to 7 year olds, as assessed by auditory and visual vigilance tasks, were related to prenatal exposure to cigarettes. Data on 76 to 79 children born to healthy, White, predominantly middle-class women were analyzed using multiple regression techniques controlling for potentially confounding variables including postnatal second hand smoke exposure. Cigarette smoking during pregnancy was related to an increased activity level of the children during the tasks and increased errors of commission in the auditory task and, to a lesser degree, in the visual task. After controlling for confounding factors, the relationship between prenatal smoking and errors of omission did not retain significance. The combination of results suggest that the deficits in attention may reflect impulsive responding and increased overall activity. 25 Ref.

Alcohol, Tobacco, and Black Americans: Health Coalition Calls for Curbs on Ethnic Ads

Prevention File Winter 1990, pp. 7-10

(Available from Prevention File, Program on Alcohol Issues, UCSD Extension, X-001, La Jolla, CA 92093.)

A coalition of 22 health and community groups is asking the Federal government to limit the alcohol content of malt liquor -- a high-proof beer -- and restrain the advertising of the product aimed at Blacks and Hispanics. The life expectancy of Black Americans has declined as a result of deaths from types of cancer linked to drinking and smok-

ing, as well as AIDS and homicide. The death rate for liver cirrhosis, linked with heavy drinking, is nearly twice as high for Blacks as for the rest of the population. Blacks also suffer disproportionately from cancer of the esophagus, also linked to drinking and smoking. Alcoholism rates are also higher among Blacks. The high incidence among Blacks of disease and illness associated with alcohol is paralleled by high rates of disease linked to the use of tobacco, including cancer, heart disease, and stroke.

Unrealistic Optimism among Adolescent Smokers and Nonsmokers

Reppucci, J. D.; Revenson, T. A.; Aber, M.; and Reppucci, N. D.

Journal of Primary Prevention 11(3):227-236, 1991

(Available from N. Dickon Reppucci, 301 Gilmer Hall, Department of Psychology, University of Virginia, Charlottesville, VA 22903.)

Two studies were conducted to investigate unrealistic optimism among adolescent cigarette smokers. In the first study, 54 smokers and 304 nonsmokers agreed that there was a strong relationship between smoking and lung cancer. Nonsmokers accurately predicted their chances of contracting lung cancer as below average. However, smokers perceived themselves as having only an average chance of contracting lung cancer. The second study replicated the first in both procedure and results regarding lung cancer, but also added perceptions of the relationship between smoking and two other smoking-related health problems, emphysema and heart attacks. The results were similar: 33 smok-

ers rated their chances of developing emphysema and having heart attacks as higher than 299 nonsmokers, but still viewed their chances as only about average. Finally, perceptions of stress were examined. Smokers perceived themselves to be under more stress than nonsmokers. It was concluded that self-deception as indicated by unrealistic optimism regarding the chances of getting smoking-related diseases characterized adolescent smokers. 7 Ref.

School-Based Smoking Prevention Program for Adolescent Girls in New York City

Hynes, M. M.

Public Health Reports 104(1):83-87, 1989
(Available from Ms. Margaret M. Hynes, Columbia University, School of Public Health, Division of Sociomedical Sciences, 600 West 168th Street, New York, NY 10032.)

Teenage girls comprise the largest percentage of new cigarette smokers in the United States today. Factors contributing to smoking initiation include peer pressure, family and social influences, cigarette availability, and cigarette advertising. Because three-quarters of smokers become dependent on cigarettes by age 20, smoking prevention programs aimed at the adolescent population have great potential. The proposed program outlined is directed at girls 12 to 18 years of age in New York City. Among the objectives are increasing students' knowledge of the short- and long-term health effects of smoking and awareness of the social factors that lead to smoking. Participants would be taught social skills and behaviors that could help them to resist initiating

smoking, by such activities as assertiveness training through role playing. Endurance sports activities would be emphasized while learning of the effects of smoking on physical conditioning. The costs of such a program are estimated, and classroom activities are outlined. 25 Ref.

Smokeless Tobacco Use by Youth in the U.S.

Boyd, G. M., and Glover, E. D.

Journal of School Health 59(5):189-194, 1989
(Available from National Institute on Alcohol Abuse and Alcoholism, Parklawn Building, Room 12-C23, 5600 Fishers Lane, Rockville, MD 20857.)

Oral snuff and chewing tobacco, commonly referred to as smokeless spitting tobacco, are being used by many adolescent and young adult males, and no indication exists that use by this group is declining. Users are at risk for oral cancer, noncancerous oral pathology such as leukoplakias, and addiction. Information about patterns of smokeless tobacco use and motivations of users may help planners develop and implement interventions. Variables include the importance of peer and family influences, social change, knowledge of harmful effects, regional differences, use of other substances, and addiction. Due to the addictive nature of smokeless tobacco, older youth may need cessation programs. Health educators are encouraged to include smokeless tobacco in their tobacco use prevention programs and to develop and implement comprehensive tobacco interventions appropriate for their youth population. 43 Ref.

Health Consequences of Using Smokeless Tobacco: Report of the Advisory Committee to the Surgeon General: 1986

Cullen, J. W. (Ed.)

Department of Health and Human Services,
Surgeon General's Advisory Committee
on the Health Consequences of Using
Smokeless Tobacco, Washington, DC,
April 1986. 195 pp.

(Available from the U.S. Department of
Health and Human Services, Public
Health Service, Blair Building, Room 427,
Bethesda, MD 20892-4200.)

This report discusses the health consequences of smokeless tobacco use. It constitutes a comprehensive review by an advisory committee to the U.S. Surgeon General of the available scientific literature to determine the health consequences of using smokeless tobacco. After a careful examination of the relevant epidemiologic, experimental, and clinical data, the committee concludes that the oral use of smokeless tobacco represents a significant health risk. It is not a safe substitute for smoking cigarettes. It can cause cancer and a number of non-cancerous oral conditions and can lead to nicotine addiction and dependence.

Health Consequences of Smoking: Nicotine Addiction. A Report of the Surgeon General

Public Health Service, Rockville, MD:
Centers for Disease Control, Office on
Smoking and Health, 1988, 20 pp.

(Available from Superintendent of
Documents, U.S. Government Printing
Office, Washington, DC 20402-9325.)

This report examines the scientific evidence that cigarettes and other forms of tobacco are addicting. Despite the sig-

nificant health risks of tobacco use, many smokers have great difficulty in quitting. Nicotine is the drug in tobacco that causes addiction. The pharmacologies and behavioral processes that determine tobacco addiction are similar to those that determine addiction to drugs such as cocaine and heroin. Tobacco use is a disorder that can be remedied through medical attention.

Smoking among Older Adults: Problems, Consequences and Possible Solutions

Rimer, B.

Surgeon General's Workshop: Health
Promotion and Aging. Background
Papers. Washington, DC: March 20-23,
1988. 173 pp.

(Available from Superintendent of
Documents, U.S. Government Printing
Office, Washington, DC 20402.)

For older smokers, as for smokers of any age, smoking is a modifiable behavior with serious health consequences. Unfortunately, the body of knowledge aimed at helping older smokers quit is limited because older smokers have been a lower priority for research than younger populations. This state of affairs must change. Although the prevalence of smoking is somewhat lower in the older population than in young groups, older adults are at least equally interested in personal health promotion; the consequences of continued smoking are especially serious for them; and the benefits of their quitting are substantial. For example, smoking cessation can improve vital capacity and reduce disability and can reduce costs to third-party reimbursers of health care costs, includ-

ing the Federal government. Clearly, older Americans who smoke should be encouraged to quit smoking.

Smoking Tobacco and Health: A Fact Book

Department of Health and Human Services,
1989

This fact book addresses the medical, social and economic aspects of cigarette smoking. It identifies cigarette smoking as the chief preventable cause of death in the United States. Areas covered include per capita consumption data, smoking by education level data, prevalence of cigarette smoking by sociodemographic characteristics, survival rate data, relapse rate information, and risks from smoking during pregnancy, among many other areas. Charts, graphs, and figures are used to highlight information provided in the text.

Health Benefits of Smoking Cessation: Report of the Surgeon General. 1990

Rockville, MD: Office on Smoking and Health, 1990. 628 pp.

(Available from the U.S. Department of Health and Human Services, Centers for Disease Control, Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, Rockville, MD 20857.)

More than 38 million Americans have quit smoking, and almost half of all living adults in the United States who ever smoked have quit. Nevertheless, more than 50 million Americans continue to smoke. This report reviews in detail the health consequences of smoking cessation for those who have quit and for those who will quit in the future. The

following conclusions summarize the health consequences of smoking cessation for those who quit smoking in comparison with those who continue to smoke: (1) Smoking cessation has major and immediate health benefits for men and women of all ages. (2) Former smokers live longer than continuing smokers. (3) Smoking cessation decreases the risk of lung cancer, other cancers, heart attack, stroke, and chronic lung disease. (4) Women who stop smoking before pregnancy or during the first 3 to 4 months of pregnancy reduce their risk of having a low birth-weight baby to that of women who never smoked. (5) The health benefits of smoking cessation far exceed any risks from the average 5-pound (2.3-kilogram) weight gain or any adverse psychological effects that may follow quitting.

Strategies to Control Tobacco Use in the United States: A Blueprint for Public Health Action in the 1990's: Smoking and Control Monograph No. 1

Shopland, D. R.; Burns, D. M.; Samet, J. M.; and Gritz, E. R. (Eds.)

Bethesda, MD: National Institutes of Health, 1991. 298 pp.

A summary is provided of what has been learned over the past 40 years of the public health effort against tobacco smoking – from the early trial-and-error health information campaigns of the 1960s to the National Cancer Institute's (NCI's) science-based ASSIST project (the American Stop Smoking Intervention Study for Cancer Prevention), which began in the fall of 1991. An historical accounting of these efforts is pre-

sented, as well as the reasons why comprehensive smoking control strategies are now needed to address the smoker's total environment and reduce smoking prevalence significantly over the next decade. While the data clearly show that only White male smokers reacted to the first wave of public information in the 1950s, the counteradvertising campaigns of the late 1960s produced a greater level of smoking cessation across all major demographic groups. The current state of the art in combatting tobacco use combines multiple environmental changes with multiple programs directed to individuals in different stages of the smoking initiation and cessation process. This strategy recognizes that no single approach is best for all individuals, that no one intervention channel is capable of effectively reaching all smokers, and that no single time is best for individual smokers to make an attempt to quit. The ASSIST framework incorporates a three-axis model, consisting of target populations, intervention channels, and interventions. More than 90 million Americans will be directly affected by ASSIST over the life of the project.

Youth Access to Tobacco

Office of the Inspector General/DHHS,
December, 1992

In July 1992, the President signed the ADAMHA Reorganization Act, which requires States to ban the sale and distribution of tobacco products to anyone under the age of 18 by October 1, 1994. This report examines the current accessibility of tobacco to minors, and discusses State and Federal options to reduce the accessibility problem. Although most States prohibit the sale

of tobacco to minors, their failure to enforce their laws would place them out of compliance with the new Federal law. The survey reports the following findings: (1) All but three States ban the sale of tobacco to minors under the age of 18; (2) Only two States are enforcing laws restricting the sale of minors statewide; (3) A few States are funding local initiatives to reduce youth access; (4) Low priority by police and lack of a designated enforcer are seen as obstacles to enforcement; (5) Despite lack of State efforts, some localities are demonstrating enforcement is possible; and (6) Vending machine restrictions are the most common initiative.

Spit Tobacco and Youth

Department of Health and Human Services,
Office of the Inspector General,
December, 1992

This study describes the present status of youth use of spit tobacco in six areas: prevalence and patterns of use, health effects, environmental influences on use, product promotion and sales, regulation and enforcement, and educational efforts. The following findings were reported: (1) Under-age spit tobacco use is high, wide-spread and begun early; (2) Often addicted to spit tobacco, under-age users are seriously endangering their health; (3) Family and friends and other incentives strongly contribute to under-age use; (4) Extensive and successful promotion of spit tobacco victimizes susceptible youth; (5) Spit tobacco laws and their enforcement are weak and ineffective; and (6) Under-age spit tobacco use is a community problem, requiring broad intervention.

Model Sale of Tobacco Products to Minors Control Act

Department of Health and Human Services,
May 24, 1990

Access of minors to tobacco is a major problem in every State of the Nation. This document contains a model law recommended for adoption by States or localities to prevent the sale of tobacco products to minors. The law would do the following: (1) Create a licensing system, similar to that used to control the sale of alcoholic beverages, under which a store may sell tobacco to adults only if it avoids making sales to minors. Signs stating that sales to minors are illegal would be required; (2) Set forth a graduated schedule of penalties--monetary fines and license suspensions--for illegal sales so that owners and employees face punishment proportionate to their violation of the law; (3) Provide separate penalties for failure to post a sign, and higher penalties for sales without a license; (4) Place primary, but not exclusive, responsibility for investigation and enforcement in a designated State agency; (5) Rely primarily on State-administered civil penalties to avoid the time delays and costs of the court system, but allow use of local courts to assess fines, similar to traffic enforcement; (6) Set the age of legal purchase at 19; (7) Ban the use of vending machines; and (8) Contain a number of features to minimize burdens on retail outlets.

Reducing the Health Consequences of Smoking: 25 Years of Progress. A Report of the Surgeon General

Atlanta, Georgia: Centers for Disease Control and Prevention, 1989

This report examines the fundamental developments over the past quarter century in smoking prevalence and in mortality caused by smoking. It highlights important gains in preventing smoking and smoking-related disease, reviews changes in programs and policies designed to reduce smoking, and emphasizes sources of continuing concern and remaining challenges. Five major conclusions are drawn from this report. They are: (1) The prevalence of smoking among adults decreased from 40 percent in 1965 to 29 percent in 1987; (2) Between 1964 and 1985, approximately 750,000 smoking-related deaths were avoided or postponed as a result of decisions to quit smoking or not to start; (3) The prevalence of smoking remains higher among Blacks, blue-collar workers, and less educated persons than among the overall population. The decline in smoking has been substantially slower among women than among men; (4) Smoking begins primarily during childhood and adolescence; and (5) Smoking is responsible for more than one of every six deaths in the United States.

Smoking and Health: A National Status Report. A Report to Congress, Second Edition

Department of Health and Human Services,
February, 1990

Cigarette smoking is the chief preventable cause of death in our society. This report presents health and cost consequences of tobacco use to Congress and the American people, broken down by each of the 50 States. The report shows that smoking is a particularly important problem for young Americans -- nearly

all smokers now start smoking regularly in their teenage years. In addition, data show that cigarette smoking is becoming increasingly concentrated among Americans with lower incomes and less education.

Clinical Interventions to Prevent Tobacco Use by Children and Adolescents

Epps, R.P., and Manley, M.W.

National Institutes of Health/National Cancer Institute/American Academy of Pediatrics, (1991)

Each day more than 3,000 children in the United States begin to use tobacco. Physicians who treat children have the opportunity to play a major role in fostering the prevention and cessation of smoking. This guide provides physicians with general recommendations on how to help prevent, delay, or minimize the use of tobacco among children and adolescents. Physicians are asked to: (1) Anticipate the risk for tobacco use at each developmental stage; (2) Ask about exposure to tobacco smoke and tobacco use at each visit; (3) Advise all smoking parents to stop and all children not to use tobacco products; (4) Assist children in resisting tobacco use, and assist tobacco users in quitting; and (5) Arrange followup visits as required. Specific suggestions are broken down according to three developmental ages. 17 Ref.

Smokeless Tobacco or Health: An International Perspective

National Cancer Institute, Smoking and Tobacco Control, Monograph 2, 1992

Smokeless tobacco use is increasing throughout the United States, especially among children. With more than 30,000 new cases of oral cancer reported in 1991 for the United States alone, it is time that use of smokeless tobacco take its rightful place next to cigarette smoking, in national and world consciousness, as a serious health risk that must be stopped. This monograph, which includes a keynote address from HHS Secretary Louis W. Sullivan, M.D., and a forward from U.S. Surgeon General Antonia Novello, M.D., discusses the issues and implications surrounding smoking tobacco use, and offers recommendations on prevention, cessation, and policy.

Other Publications

Gateway Theory Revisited: Alcohol, Cigarette, and Marijuana Use Patterns of Young Adults

Yu, J., and Williford, W. R.

Report, New York State Division of Alcoholism and Alcohol Abuse, Albany, NY, 1990

(Available from Jiang Yu, Ph.D., New York State Division of Alcoholism and Alcohol Abuse, 194 Washington Avenue, Albany, NY 12210.)

Using the data from the New York State Youth Alcohol Survey (1986), the authors re-examined the gateway theory. Logit analysis is employed to estimate the causal effect of using one type of drug on the subsequent use of other drugs. Comparisons are made between male and female alcohol and other drug use patterns. The data suggest that alcohol use tends to increase the chance of using cigarettes, and the chance of mari-

juana use is increased by the use of alcohol and cigarettes. The onset age of alcohol use is found to influence the current pattern of alcohol and other drug use; most young adult current alcohol and other drug users started drinking in the critical onset age period between 13 and 16. 21 Ref.

Adolescent Smoking: A Review of Prevalence and Prevention

Miller, S. K., and Slap, G. B.

Journal of Adolescent Health Care
10(2):129-135, 1989

(Available from Dr. Gail B. Slap, Section of Adolescent Medicine, Children's Hospital of Philadelphia, 34th Street and Civic Center Boulevard, Philadelphia, PA 19104.)

This review critically evaluates the extensive literature on the epidemiology and prevention of adolescent smoking. Trends in adolescent smoking attitudes and behavior as well as the immediate and long-term health consequences of adolescent smoking are discussed. The factors associated with adolescent smoking and several smoking interventions are analyzed. Suggestions are made for improving the evaluation of future programs designed to prevent adolescent smoking. 79 Ref.

Longitudinal Effects of the Midwestern Prevention Project on Regular and Experimental Smoking in Adolescents

Pentz, M. A.; MacKinnon, D. P.; Dwyer, J. H.; Wang, Y. I.; Hansen, W. B.; Flay, B. R.; and Johnson, C. A.

Preventive Medicine 18(2):304-321, 1989

(Available from University of Southern California - School of Medicine, Department of Preventive Medicine, 35 North Lake Avenue, Suite 200, Pasadena, CA 91101.)

The purpose of this study was to compare longitudinal smoking prevention program effects estimated on a population-based cohort sample of sixth-grade students (average n per year = 4,664) using different schools as units of analysis (middle/junior high school as the school of origin or high school of intervention). Fifty schools in 15 school districts were demographically matched and assigned to either a school and community-based program for prevention of cigarette, alcohol, and marijuana use, or a health education as usual control group. Smoking was measured by questionnaires administered to the students. An expired air (CO) measure of smoking was also administered to increase accuracy of self-reports. Program effects were estimated with regression analyses, controlling for school-level socioeconomic status, racial/ethnic make-up, urbanicity, and grade. Using school of origin as the unit of analysis, program effects showed 1-year net reductions of -8, -6, and -5 percent in prevalence rates of smoking in the last month, last week, and last 24 hours; 2-year program effects showed similar net reductions of -6, -5, and -3 percent (P 's < 0.001). Analyses with endpoint school as the unit showed slightly weaker effects at the 2-year follow-up, the year during which 64 percent of students had moved to a junior high or high school. The findings are discussed in terms of the potential contamination of experimental groups in longitudinal studies from school consolidations, family mobility, and feeder patterns to high schools, and the differ-

ent smoking environments represented by middle, junior high, and high schools. 35 Ref.

Effects of Alcohol and Tobacco Advertising on Adolescents

Orlandi, M. A.; Lieberman, L. R.; and Schinke, S. P.

In *Perspectives on Adolescent Drug Use*, B. Segal, Ed., pp. 77-97. Binghamton, NY: Haworth Press, Inc., 1989

(Available from Haworth Press, Inc., 10 Alice Street, Binghamton, NY 13904-1580.)

Alcohol and tobacco consumption have been identified as leading causes of morbidity and mortality in the United States. Despite this fact, these drugs are sold legally and advertising is generally permitted. A variety of restrictions have, nonetheless, been imposed on both the sales and the advertising of these products and still others have been proposed, though this has become a highly controversial issue and the source of considerable debate. The aspect of this debate, which centers on children and adolescents, is the topic of this article. Public health advocates claim that recent alarming trends in the prevalence of alcohol and tobacco use among minors are due, at least in part, to the extensive advertising campaigns in which these industries engage. Industry representatives retort that, since no scientific research study has proven that their ads cause consumption among this age group, these claims are unfounded. The purpose of this article is to analyze what have, to date, been sources of considerable confusion in this area and to suggest an alternative framework for future discussions. 69 Ref.

Passive Smoking on Commercial Airline Flights

Mattson, G. E.; Boyd, G.; Byar, D.; Brown, C.; Callahan, J. F.; Corle, D.; Cullen, J. W.; Greenblatt, J.; Haley, N. J.; Hammond, S. K.; Lewtas, J.; and Reeves, W.

Brown University Digest of Addiction Theory and Application 8(7):7-8, 1989

This study measured the effect of ambient tobacco smoke on nonsmokers flying on typical commercial flights. Nine nonsmoking subjects (four flight attendants and five passengers) participated on each of four flights. The attendants were rotated between smoking and nonsmoking sections while the passengers were seated in or near smoking sections. All the subjects on all flights were exposed to measurable levels of smoke. In addition, many perceived a smoky environment and experienced eye and nose irritation. Cotinine (a nicotine metabolite) levels in urine returned to pre-flight levels 72 hours postflight. The authors concluded that even with the segregation of smoking and nonsmoking sections, passive tobacco smoking in closed environments posed a health risk. 5 Ref.

Predictors of Chewing Tobacco and Cigarette Use in a Multiethnic Public School Population

Elder, J. P.; Molgaard, C. A.; and Gresham, L.

In *Forum on Alcohol and Other Drug Concerns among California Asians and Pacific Islanders*. Sacramento, CA: February 4 - 5, 1990

(Available from John P. Elder, San Diego State University, Graduate School of Public Health, San Diego, CA 92182.)

Smoking and tobacco-chewing habits of sixth and seventh graders were investigated. Four hundred thirty-three White, Black, Mexican-American, and Oriental students in San Diego public schools self-reported their tobacco use as well as perceptions of use among their peers and friends, parental socioeconomic status, and other variables. One-third of the respondents had used some form of tobacco at least once, with cigarette smoking more common than chewing. Norm perceptions and best friend's habits predicted both smoking and chewing experimentation and prevalence. White males were more frequent "chewers," while Blacks and Mexican-Americans were more frequent smokers. Significant associations between the two types of tobacco use were also found.

Passive Smoking and Heart Disease: Epidemiology, Physiology, and Biochemistry

Glantz, S. A., and Parmley, W. W.

Conference Paper. Perth, Australia: April 1 - 5, 1990. 29 pp.

(Available from Stanton A. Glantz, Division of Cardiology, Box 0124, M1186, University of California, San Francisco, CA 94143-0124.)

The evidence that environmental tobacco smoke (ETS) increases risk of death from heart disease is similar to that available when the Surgeon General concluded that ETS caused lung cancer in healthy nonsmokers. ETS increases risk of death from heart disease by 30 percent among nonsmokers living with smokers. ETS adversely affects platelet function and damages arterial endothelium. ETS significantly reduces exercise capability of healthy people

and those with heart disease, as well as mitochondrial respiration. The polycyclic aromatic hydrocarbons in ETS accelerate the development of atherosclerotic plaque. ETS causes heart disease and is the third leading preventable cause of death, after active smoking and alcohol. 71 Ref.

Smokeless Tobacco Addictive, and a Gateway Drug

Henningfield, J.

Tobacco and Youth Report Autumn 1990

The danger of smokeless tobacco, as a gateway to using illicit drugs and as a relatively difficult drug to quit using, is described in this article. Marketing strategies that appeal to youth are described, including starter products that taste like candy and are often given as samples. The article cites research that indicates that use of smokeless tobacco escalates at a rate four times that of cigarettes. The marketing and the addiction rate is implicated in a six-fold increase in the number of males age 17 to 19 who regularly use smokeless tobacco. Research is reported to support the contention that smokeless tobacco is a gateway drug.

Gender Differences in Psychosocial Determinants of Adolescent Smoking

Clayton, S.

Journal of School Health 61(3):115-120, 1991

(Available from Serena Clayton, University of California - Los Angeles, Division of Behavioral Sciences and Health Education, Los Angeles, CA 90024.)

Because of the social meaning smoking has acquired and because of different trends in male and female initiation rates, it is reasonable to suspect that different psychosocial factors predict smoking in teenage boys and girls. A literature review revealed external pressures such as peer and parental smoking are important for both boys and girls though their influence may be moderated differentially by age and type of smoking assessed. Some data support the hypothesis that female smoking is associated with self-confidence, social experience, and rebellion, whereas male smoking is associated with social insecurity. Overall, group differences such as gender and socioeconomic status are well-documented in terms of smoking prevalence but underexplored in the area of psychosocial predictors. In this review, gender differences have been documented with sufficient frequency to warrant further attention to develop gender specific components of smoking prevention programs. 28 Ref.

Women and Smoking: Current Trends and Issues for the 1990s

Berman, B. A., and Gritz, E. R.

Journal of Substance Abuse 3(2):221-238, 1991

(Available from Barbara A. Berman, Division of Cancer Control, Jonsson Comprehensive Cancer Center, University of California - Los Angeles, 1100 Glendon Avenue, Suite 711, Los Angeles, CA 90024.)

Despite significant change in smoking patterns among women during the 1980s, the toll in tobacco-related morbidity and mortality remains high and will continue to rise for some diseases (e.g., lung cancer). Women with lower educa-

tional attainment are at particularly high risk for smoking initiation and continuation. Advances in gender-specific knowledge regarding the processes on initiation, cessation, and relapse provide more specific opportunities for targeted intervention. Strategies for change involve media, clinical approaches, and public health efforts. Emphasis needs to be placed on tailoring the message and on using innovative channels through which women can be effectively reached. Advocacy groups are targeting public policies affecting women. Ongoing gender-specific research is needed in the next decade. 136 Ref.

Teen Smoking Boosts Risk for Later Pot Use

The Bottom Line 1991

According to a recent analysis of Federal surveys, adolescent cigarette smokers are 100 times more likely to smoke pot than are teenage non-smokers. Many believe that tobacco addiction serves as a major gateway to other forms of drug addiction. Not only does smoking tobacco predict later use of marijuana, but increasing levels of tobacco use also are associated with future episodes with other illicit drugs such as cocaine and heroin. Tobacco is one of the most important preventable risk factors for the development of other drug addictions. Other survey results conclude that tobacco appears to be more addictive than alcohol or other drugs, 40 percent of those teenagers who smoke daily had been drunk in the last 30 days, users of smokeless tobacco were more likely to use cigarettes, marijuana, or alcohol than non-users, and use of other drugs such as heroin, co-

caine, amphetamines, and sedatives is associated with increased levels of nicotine dependence. It is believed that studying tobacco use can serve as a model to investigate the biological mechanisms of those other drug dependencies, and that more effective efforts to prevent smoking might help curtail the spread of illicit drug use.

Factors Related to Cigarette Smoking During Adolescent Pregnancy

Hussey, J. M.; Gilchrist, L. D.; Gillmore, M. R.; and Lohr, M. J.

Journal of Youth and Adolescence
21(4):409-420, 1992

(Available from Jon M. Hussey, School of Social Work JH-30, University of Washington, Seattle, WA 98195.)

Previous research suggests that maternal smoking during pregnancy remains prevalent, particularly among adolescents. However, little is known about the factors related to smoking during adolescent pregnancy. The goal of the present study is to identify intrapersonal, familial, and peer factors that are related to smoking during adolescent pregnancy, and to determine the relative degree to which they affect this behavior. Interviews were conducted with 241 unmarried pregnant adolescents who planned to carry their pregnancies to term. Consistent with previous studies, 27 percent of the respondents reported daily smoking during pregnancy, and Whites reported higher rates of use than members of other racial groups. Smoking during adolescent pregnancy was related to intrapersonal, familial, and peer factors. The results of a regression analysis suggest that perceived parental disap-

proval of smoking during pregnancy, friends' cigarette use, and race play a particularly important role in this behavior. The implications of these findings for preventive programs are discussed. 36 Ref.

Ethnicity and Psychosocial Factors in Alcohol and Tobacco Use in Adolescence

Bettes, B.A.; Dusenbury, L.; Kerner, J.; James-Ortiz, S.; and Botvin, G.J.

Child Development 61(2):557-565, 1990

The relationship between ethnicity and psychosocial factors and alcohol and/or tobacco use during adolescence was evaluated. The study sample included 2,125 seventh grade students in 47 public and parochial schools in New York City that contained at least 25 percent Hispanic students. The study evaluated the differences between Black, Anglo, Puerto Rican, and Dominican adolescents in cigarette smoking, alcohol consumption, and psychosocial functioning. The study results revealed the following: (1) Public school students reported less use of alcohol but similar use of tobacco when compared to parochial school students; (2) Dominican students reported more use of alcohol than Black and Puerto Ricans, while Puerto Ricans reported more use than Blacks; and (3) There was no significant difference in tobacco use between the three ethnic groups. In addition, the data indicate that psychosocial functioning affects substance use differently in the groups and that the use of alcohol may be more compatible with Dominican culture than the others. However, it is

not clear whether these constructs will predict increased drug use by adolescents or not. 33 Ref.

Psychosocial Approaches to Smoking Prevention: Review of Findings

Flay, B. R.

Health Psychology 63 p.(1985)

(Available from Brian R. Flay, Health Behavior Research Institute, 1985 Zonal Avenue, Los Angeles, CA 90033.)

Twenty-six school-based studies of psychosocial approaches to smoking prevention are reviewed. Two major approaches are represented: the "social influences" approach, and the broader "life/social skills" approaches. The research studies are considered in four "generations": (1) The seminal work by Richard Evans and colleagues at the University of Houston; (2) Seven "pilot" studies of improved programs at Stanford, Minnesota, New York and Washington, with one school or classroom per experimental condition; (3) Eleven improved "prototype" studies by these four groups and others, with two or three units randomly assigned to conditions; and (4) Six studies where maximizing internal validity was of prime concern. None of the pilot or prototype studies considered alone provided interpretable results; however, reported results were fairly consistent, with each tested program seeming to reduce smoking onset by about 50 percent. The major contribution of the pilot and prototype studies was improved programs and methods.

Selling Smoke: Cigarette Advertising and Public Health

Warner, K. E.

Washington, DC: American Public Health Association, 1986. 112 p.

(Available from the American Public Health Association, 1015 15th Street, NW, Washington, DC 20005.)

This monograph explores the relationship of cigarette advertising to public health. It comes in the wake of proposals by major health and medical organizations that promotion of tobacco products be banned. The monograph describes the nature and magnitude of promotional expenditures on cigarettes; identifies the diverse functions that advertising and promotion are alleged to serve; reviews the evidence on the relationship between advertising and cigarette consumption; examines the issues involved in the ad ban proposal; and offers an assessment of whether the ban should be implemented.

Every C'ud Has a Silver Lining, Even with Airline Smoking Ban

Bottom Line 9(4):48-50, 1990

Now that the airlines have banned in-flight smoking, some smokers have found that chewing gum, taking deep breaths, and eating tend to calm the urge to light up. Coffee and alcohol offer no relief at all in easing the pain from nicotine withdrawal. The biggest help for cigarette-addicted flyers is CigArrest Gum, advertised as "The Traveler's Smoking Alternative." It became air travelers' only alternative to lighting up, and includes a stop-smoking kit, tablets, and the new gum. More competition is on the way, principally from makers of nicotine patches that

slowly release nicotine into the wearer's skin to ease withdrawal symptoms. Leading marketers say the airline smoking ban may encourage other manufacturers to end CigArrest's dominance in the growing market for "smoking cessation" products. The CigArrest products are an important option for people who won't spend \$500 to \$1000 to go to a smoking cessation clinic or who don't have the time. More important, they are affordable, readily accessible and available when motivation is high.

Comprehensive Approaches to Tobacco Use Control

Glynn, T. J.

British Journal of Addiction 86(5):631-635, 1991

(Available from Thomas J. Glynn, National Cancer Institute, Smoking, Tobacco, and Cancer Program, Executive Plaza North, #320, 9000 Rockville Pike, Bethesda, MD 20892.)

This essay suggests approaches to two issues of importance to the future of tobacco use control research. First, there is need to identify those areas of tobacco use prevention and cessation research that have evolved to the point where additional investigation would only bring incremental gains. The reduction potential of this research should then be consolidated by applying existing, effective interventions widely and systematically. Conversely, there is need to identify those areas in which additional research is necessary. Second, the most logical way to reach agreement on those areas which are ready to move from research to application-of-research is, with the cooperation and advice of the research community, through the large funding organizations which have supported

this research over the past two decades. It is these organizations which, once the most effective interventions are identified, are capable of supporting the centrally planned, consensus-driven, comprehensive approaches to tobacco use control which will be necessary to continued success in reducing tobacco-related mortality in the industrialized world and to begin addressing the growing problems of tobacco use in the developing world.

Marketing Disease to Hispanics: The Selling of Alcohol, Tobacco, and Junk Foods

Maxwell, B., and Jacobson, M.

Washington, DC: Center for Science in the Public Interest, 1989. 100 pp.

The marketing of alcohol, cigarettes, and junk foods, targeted at the Hispanic population is discussed. It is noted that these are products that result in drinking and driving, cancer, heart disease, and obesity. Chapter headings within this book include: (1) Marketers discover Hispanics; (2) Hispanic health risks; (3) Targeting Hispanics; (4) Event marketing; and (5) Contributions to Hispanic organizations. Tables include: (1) Hispanic ad dollars spent by category; (2) Percentage of men suffering from alcohol problems; (3) Smoking rates of Hispanics, Blacks, and Whites; (4) Lung cancer rates for Hispanics and Whites; (5) Mortality rates for smoking-related diseases; (6) Cancer rates among Hispanics and Whites; (7) Cigarette use by Hispanic and White children ages 10 to 15; (8) Obesity among women ages 18 and over; and (9) Top advertisers in the Hispanic market, 1988. 258 Ref.

Selling the Smokeless Society

Flay, B. R.

American Public Health Association,
Washington, DC, 1987

(Available from the American Public Health
Association, 1015 15th Street, NW,
Washington, DC 20005.)

This monograph reviews and synthesizes evaluations of 56 mass media programs and campaigns designed to reduce cigarette smoking. Programs are divided into three groups according to format and objectives: (1) Programs and campaigns designed to inform smokers about the consequences of smoking and to motivate smokers to want to quit; (2) Programs and campaigns designed to promote some specific action preparatory to smoking cessation; and (3) Televised self-help cessation clinics. The programs and campaigns providing information and/or motivation generally produced significant changes in awareness, knowledge, and attitudes; however, only extensive national campaigns also produced meaningful behavior change. Programs and campaigns promoting specific actions produced mixed results, depending in large part on the type of promotion involved. Televised self-help clinics were generally effective. Viewing alone was as effective as using an effective self-help manual, while requesting a manual to accompany a self-help clinic almost doubled the effectiveness of television alone.

Tobacco Money, Tobacco People, Tobacco Policies: How Millions of Tobacco Dollars and Tobacco People in High Places Drive White House Pro-Tobacco Industry Policies

Samuels, B.; Douglas, C.; Wolfe, S.; and Wilbur, P.

Public Citizen's Health Research Group,
Advocacy Institute, August 1992

Between the 1988 Presidential election and August 1992, roughly \$3.11 million in tobacco soft money was given to Republicans and Democrats. This report analyzes the role this tobacco money plays in enacting White House policies, and asserts that many anti-tobacco efforts have been squelched due to the tobacco industry's strong influence on the executive branch. The report is divided into four parts: Part one, entitled, *The Money*, charts the extent which tobacco donations are made to political figures, citing that through June 30, 1992, the tobacco industry gave over \$2 million for the 1992 election; *The People*, part two, lists and describes 45 people in the Bush, Clinton, Reagan, and previous administrations or campaigns with strong ties to or presence in the tobacco industry; Part three, *The Policies*, explains that recent presidential policies have been to oppose legislation to place more controls over tobacco use and to simultaneously force American tobacco into foreign markets via the U.S. Trade Representative; and Part four, *Recommendations*, offers three suggestions: (1) Presidential candidates should refuse to accept any contribution from the tobacco industry; (2) No tobacco industry officials should be in key administration or campaign posts; and (3) The new president should push for legislation to

ban all tobacco advertising and to substantially increase Federal excise tax cigarettes as Canada has done. 122 Ref.

The Congressional Addiction to Tobacco: How the Tobacco Lobby Suffocates Federal Health Policy

Wolfe, S.; Douglas, C.; Wilbur, P.; Kirshenbaum, M.; McCarthy, P.; Bame, A.; and McKnew, D.

Public Citizen's Health Research Group
Advocacy Institute, October 1992

Despite the fact that tobacco is the leading preventable cause of death and disease in the United States and around the world, Congress has done very little to combat the tobacco epidemic. This is the most comprehensive report to date regarding the tobacco industry's successful attempt to buy Congress and the deadly pro-tobacco legislative gridlock that continues to afflict our Federal legislators. There are four sections of this report. In the first section, *The Death Money*, the authors focus on the money the industry has contributed to congressional campaigns, and also examine the additional personal contributions made by tobacco industry executives and lobbyists, and those individuals who support the tobacco political action committees (PACs). The second section of the report, *The Policies*, looks at the impact of the tobacco industry money and influence on the business of Congress, that is the making of public policy. Section three, *Public Opinion*, examines the desires of the majority of the American people, and determines that congressional inaction is not what the majority favors. In section four, *Recommendations*, the authors suggest that candi-

dates for Congress not accept any contributions from tobacco companies or their representatives, and that members of Congress start to represent the wishes of their real constituents, as opposed to those of the tobacco lobby, by enacting strong public health policies to combat the devastating health and economic problems wrought by tobacco. 93 Ref.

Groups, Organizations, & Programs on Tobacco

Action on Smoking and Health
2013 H Street, NW
Washington, DC 20006
202-659-4310

Advocacy Institute
1730 Rhode Island Avenue, NW
Suite 600
Washington, DC 20036
202-659-8475

American Cancer Society
1599 Clifton Road, NE
Atlanta, GA 30329
1-800-ACS-2345

American Heart Association
7272 Greenville Avenue
Dallas, TX 75231
214-373-6300

Americans for Non Smokers' Rights
2530 San Pablo Avenue, Suite J
Berkeley, CA 94702
510-841-3032

Cancer Information Service
1-800-4-CANCER

Coalition on Smoking OR Health (CSH)
(legislative information only)
1150 Connecticut Avenue, NW
Suite 820
Washington, DC 20036
202-452-1184

Hazelden Educational Materials
P.O. Box 176
Center City, MN 55012-0176
1-800-328-9000

Johnson Institute
7205 Ohms Lane
Minneapolis, MN 55439-2159
1-800-231-5165

Local American Lung Association
(Consult your telephone directory)
Lung Line
National Asthma Center
1-800-222-5864

National Clearinghouse for Alcohol and Drug Information
P.O. Box 2345
Rockville, MD 20847
301-468-2600, 1-800-729-6686

National Heart Lung and Blood Institute
Information Center
P.O. Box 30105
Bethesda, MD 20824-0105
301-951-3260

Office on Smoking and Health
4770 Buford Highway, NW
Mail Stop K-50
Atlanta, GA 30341
404-488-5705

Pan-American Health Organization
525 23rd Street, NW
Washington, DC 20037
Fax: 202-861-8466

Smokefree Educational Services, Inc.
375 South End Avenue, #32F
New York, NY 10280
212-912-0960

St. Helena Hospital and Health Center
P.O. Box 250
Deer Park, CA 94576
1-800-862-7575 (in CA)

Stop Teenage Addiction to Tobacco (STAT)
121 Lyman Street, #210
Springfield, MA 01103
413-732-7828 OR 1-800-998-7828
1-800-358-9195

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Do you have any suggestions for making future Resource Guides more useful?

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